

## Summer Village of Silver Sands PO Box 8

Alberta Beach, AB T0A 0A0 Phone: 587-873-5765



www.summervillageofsilversands.com

	(	GAS PERMIT APPL	LICATION FORM		
oplication Date: Estimated Project Completion Date:					
pplicant Type: 🔲 Ho	meowner   Contractor	Cost of Installation (I	_abour & Material including Equip	oment) \$	
ne Permit Holder hereby certifie issue of the permit, (b) is susp	s that this installation will be completed in ended or abandoned for a period of 120 days	accordance with the Alberta Safety ( ays. An extension can be considered	Codes Act. A permit may expire if the und when applied for in writing prior to permit	lertaking to which it applies: (a t expiry date.	i) is not commenced within 90 days
Owner Name		Ma	illing Address:		
	Prov:				
	Declaration (Single Family Ro	Cell:	Email:		
Owner's Signature / "I hereby declare I am the ow applicable Act and Regulatio	vner of the premises in which the work will	esidential Only) be conducted and reside or will reside	de on the property. I am doing the work m	nyself, and assume responsibi	lity for compliance with the
Company Name:		Ma	iling Address:		
City:	Prov:	Postal Code:	Phone:	Fax: _	
Cell:	Email: _				
Installer's Number Print Installer's Name Installer's Signature					
Project Location in t	the Summer Village of Silver S	Sands:			
Street Address:					
Legal Subdivision: Pa	art of: Section	: Towns	hip: Range: _	We:	st of:
Subdivision Name:		Lot:	Block:	Plan:	
Directions:					
TYPE OF OCCUPANCY:	NUMBER OF OUTLETS:	COMMI ONLY:	ERCIAL/INDUSTRIAL APPLIC	ATION PRO	PANE INSTALLATION:
☐ Residential	Furnace _	Total B	τυ	No. o	of Tanks
	Water Heater	Name o	of Gas Supplier	Tank	Size
Farm/Ranch	Fireplace Dryer		и одо одрушог	Seria	al #
☐ Commercial	Unit Heater	DESCR	IPTION OF WORK FOR ALL (	GAS	
☐ Industrial	Range _		PERMITS:		
☐ Oilfield/Gas	Room Heater _				/aporizer Refill Centre
☐ Institutional	Boilers _ Conversion				Service Line from Tank
	Replacement Appliance			f	to Building
☐ Mobile	Secondary Risers				Temporary Heat
☐ Manufactured	Barbeque _				
	Other _				ANNUAL PERMIT
Payment Type:	Cash ☐ Cheque ☐ Interac ☐	M/C ☐ Visa		Inspections Group I	
Permit Fee: \$				00W, 14310 – 111 Avenue NV EDMONTON AB T5M 3Z7 1454 5048 Toll Free: (i	
+ SCC Levy*: \$			Fax: (780)	454 5222 Toll Free: (	866) 554 5048 866) 454 5222
Total Cost: \$		Receipt #:		ww.inspectionsgroup.com	
*\$4.50 or 4% of the perm	nit fee maximum \$560.00		ques	แบบจะแบบคะเบบเอนเบน	, John